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CONFIRMATION NO. 4171

SERIAL NUMBER 10/707,044	FILING OR 371(c) DATE 11/17/2003 RULE	CLASS 600	GROUP ART UNIT 3737	ATTORNEY DOCKET NO. 289-PDD-07-39 US
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APPLICANTS

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** CONTINUING DATA *****

This appln claims benefit of 60/427,048 11/18/2002

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 12/09/2003

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Verified and Acknowledged Examiner's Signature _____ Initials _____	STATE OR COUNTRY MI	SHEETS DRAWING 10	TOTAL CLAIMS 68	INDEPENDENT CLAIMS 3
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ADDRESS

69683

TITLE

TISSUE LOCALIZING AND MARKING DEVICE AND METHOD OF USING SAME

FILING FEE RECEIVED 1257	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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